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ABSTRACT

School refusal, as differentiated from both school phobia and truancy, is a term used to denote emotionally-based avoidance of school. To identify factors associated with school refusal, 41 junior high and high school students (including special education school refusers, special education non-refusers, and a comparison group from a regular classroom) were assessed using a fear schedule, a locus of control questionnaire, and a standardized diagnostic interview. Attendance information and academic achievement test scores were obtained from school records. Ratings of behavior problems at home and in school were obtained from parents and teachers. Results showed that in addition to high rates of fear and absenteeism, school refusers experienced family problems, anxiety, depression, somatic complaints, problems with peers, and a belief that they had little control over their academic performance. In comparison to the school refusers, their non-refuser, special education classmates had a more internal locus of control, were less anxious and depressed, and reported fewer problems with school. The normal comparison group was significantly less disturbed than the special education groups on most of the subscales reported. These results suggest that school refusal is not a unitary problem entity, but that it is merely one facet of a general socioemotional problem complex characterized by mood disturbance, social isolation, problems in relating to family members, somatic complaints, immature emotional outbursts, strange ideas, and feelings of helplessness.
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Factors Associated with School Refusal in Adolescents: Some Preliminary Results

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Factors Associated With School Refusal in Adolescents: Some Prelimary Results

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Abstract

This study identifies factors which are associated with school refusal, and which may prove useful in planning treatment and educational programs. Adolescent school refusers were assessed using a fear schedule, a locus of control questionnaire, and a standardized diagnostic interview. Attendance information and academic achievement test scores were obtained from school records. Ratings of behavior problems at home and in school were obtained from each student's parents and teacher.

In addition to high rates of fear and absenteeism, the school refusers reported experiencing family problems, anxiety, depression, somatic complaints, problems with peers, and a belief that they have little control over their academic performance. In comparison to the school refusers, their non-refuser, special education classmates had a more internal locus of control, were less anxious and depressed, and reported fewer problems with school. The normal comparison group was significantly less disturbed than the special education groups on most of the subscales reported.

These results suggest that school refusal is not a unitary problem entity, but that it is merely one facet of a general socioemotional problem complex characterized by mood disturbance, social isolation, problems in relating to family members, somatic complaints, immature emotional outbursts, strange ideas, and feelings of helplessness. These findings point to the importance of individual educational planning for school refusers to ensure that students not only are returned to school, but that they are achieving some success there, both academically and socially.

Factors Associated with School Refusal in Adolescents:

Some Preliminary Results

School refusal among adolescents poses a significant social and educational problem, with a prevalence ranging from less than 1% to as high as 20% or more in the general population (Aldaz, Munoz, Gelfand, & Feldman, 1981; Kahn & Nursten, 1962). Estimates of the prevalence of school refusal vary greatly depending upon child characteristics such as age, sex, and SES and upon the restrictiveness and number of the criteria used to characterize the problem. However, according to many authors the rate peaks at about age 11 years (Smith, 1970) and again in adolescence (Rutter, Graham, Chadwick, & Yule, 1976). The increased academic demands in the upper school years may contribute to rising rates of school refusal, as may the increased pressures for peer acceptance that typify adolescence. Therefore, it is of particular interest to examine school refusers' academic and social concerns relative to those of other special education students and of unselected students in a regular classroom.

School refusal is a term used to denote emotionally based avoidance of school, and is differentiated both from school phobia and truancy. School phobia is a more restrictive condition which involves fear of some specific aspect of the school situation. In contrast, school refusal refers to irrationally-based chronic absenteeism that may involve a host of different causative factors including but not limited to school phobia (Nicholos, 1970). School refusal also differs from truancy in that, although both may be associated with high absenteeism rates, the truant's behavior more closely resembles conduct disorder, and the refuser's behavior is characterized by fear-motivated avoidance (Hersov, 1960). Compared to school refusers, the

truants typically show lower academic achievement, periodic rather than extended periods of continuous absences, and avoidance of home as well as school (Gordon, 1976).

In general, school refusers appear unable to cope with the normal stresses and strains of the academic situation. School refusers may want to go to school but cannot since they experience intense anxiety, often accompanied by somatic complaints, when they are urged to attend school and make an effort to do so (Chazan, 1960). Their anxiety and distress are relieved temporarily when their parents allow them to stay at home. However, remaining at home may lead to additional problems such as increased conflict with parents and the loss of peer socialization experiences due to isolation from other teenagers who are at school. The present study investigated the extent to which school refusal is associated with problems in relating to parents and agemates.

Like many other serious and socially costly behavior disorders, chronic school refusal has been resistant to treatment. For example, a one-year follow-up study of chronic school refusers, (Berg, 1980) found approximately 1/3 to be well-adjusted, 1/3 to have moderate adjustment problems, and the remaining 1/3 to be severely affected by social and emotional problems. These findings are consistent with other follow-up studies of adolescent school-refusers (e.g., Rodriguez et al., 1959; Hersov, 1960). Only about 1/2 of hospitalized adolescent school refusers return to school following treatment (McDonald & Sheperd, 1976). Thus, the prognosis for such adolescents is relatively poor. It is necessary first to examine the nature and extent of their problems as is done in this study in order to plan more effective treatment interventions.

Both conceptual and methodological problems have impeded assessment and treatment efforts (Gordon & Young, 1976). Imprecise definitions have made it impossible to determine whether school refusers have improved as the result of special educational and psychological programs. Reliance on return to school as an outcome measure has ignored the possibility that students may have begun attending school once again, but are experiencing serious emotional turmoil. An additional purpose of the present study was to identify variables and measures useful for identifying school refusal and for assessing possible improvement, rather than relying on return to school alone.

Method

Subjects were 41 students from 14 to 17 years of age ($\bar{X}$ = 15 years) who were recruited from self-contained special education classrooms in two junior high schools and one high school. Non-special education students were also recruited from a regular junior high school class. Because the criteria for inclusion in the self-contained classrooms were not well defined, stringent criteria for school refusal were utilized to exclude truants from the sample (Aldaz, Munoz, Gelfand, & Feldman, 1982). These criteria were: (1) a nonattendance rate for the school year of 20% or greater, and (2) an elevated score (greater than 19) on the school subscale of the Fear Survey Schedule for Children (FSSC). Eleven of the non-attenders (five males and six females) who met the inclusion criteria for school refusal agreed to participate. Additionally, two comparison groups were included in the study. One group was composed of eleven non-attenders (nine boys and two girls) who were in the self-contained classrooms but did not meet the criteria for school refusal. The second (normal) comparison group included 19 students (nine males and 10

females) from a regular class who were not receiving special education services.

Attendance information and academic achievement test scores were obtained from the school records of each student with parental permission. Ratings of behavior problems at home and in school were obtained by asking the student's parents and teacher to complete an Achenbach Child Behavior Checklist Achenbach, 1978; Achenbach & Edelbrock, 1979).

In classroom group testing sessions subjects individually completed the Fear Survey Schedule for Children (FSSC) (Scherer & Nakamura, 1968), to indicate types and intensities of their fears, and the Intellectual Achievement of Responsibility Inventory (IAR) (Crandall, Katkovsky, & Crandall, 1965), which measures perceived locus of control regarding academic situations. Each student also was administered a standardized diagnostic interview, the Child Assessment Schedule (CAS) (Hodges & Kline, 1982), which provides information regarding the student's school, family, and social adjustment, mood, thought disorder, somatic concerns, fears and anxieties, and self-perception. The examiner (either of two women psychology graduate students) read each interview question aloud, and subjects marked their answers on the test form. Upon completion of the questionnaires, each student was interviewed individually in a secluded room. Students' answers and comments were tape recorded to minimize administration and response recording time and to provide an unobtrusive means for calculating inter-rater reliability. Each student's testing was completed within a time period of one month.

Results and Discussion

Comparisons among groups

In Figure 1, the standard score means on the adjustment problem variables are plotted for the school-refusers, non-refusers, and normal students. In virtually every case, the school-refusers show the greatest problems in adjustment, normals are the least maladjusted, and the non-refusers typically fall somewhere inbetween. The primary problems experienced by school-refusers are depression ($\underline{X}$ = 3.3), fear ($\underline{X}$ = 2.4), and family problems ($\underline{X}$ = 1.5), in that order. The non-refusers have the greatest disturbances in family problems ($\underline{X}$ = 0.7), reality testing ($\underline{X}$ = 0.7), and depression ($\underline{X}$ = 0.5), respectively.

For all of the adjustment problem variables, t-ratios were computed comparing the standard score means of school refusers to non-refusers, school-refusers to normals, and non-refusers to normals. The results of these analyses are summarized in Tables 1, 2, and 3.

School-Refusers vs. Normals

As displayed in Table 1, school-refusers are significantly more maladjusted than the normals in all of the adjustment problem variables. The school-refusers experience significant difficulty with their families ($\underline{t}$ = -4.9, $\underline{p}$ .05) and peers ($\underline{t}$ = -3.2, $\underline{p}$ .05). For example, 20% of the school-refusal sample could not give the names of at least three or more friends. Forty-three percent of the sample indicated that their parents have persistent relationship difficulties and exactly half of the school-refusers reported that they feel better when they are away from home. Surprisingly, only 14% of the refusers said that they felt distressed or panicky when away from home.

School-refusers also experience a significant degree of depression compared to normals (t = -3.1, p .05). Forty-three percent of the school-refusers indicated that they felt sad most of the time, and 42% indicated that they think about death often. The majority of school-refusers (79%) could not give a description of themself when asked "If someone else described you what would they say about you?" and an additional 14% described themselves in negative terms only (e.g., dumb, not liked).

Somatic complaints are also significant among school-refusers (t = 3.7, p .05), with 79% of the sample indicating that they experience trouble sleeping, and that they have frequent headaches and stomach aches (43%).

The school-refusers are also much more fearful than the normal students (t = -1.6, p .05). The most excessive school fears reported by the refusers are: "performing before a class or a group," "going to the blackboard," and "being called on unexpectedly by the teacher," in that order. Items on the fear survey schedule such as "having to go to school," and "taking a test," were not endorsed as the more fear producing items. Thus, it appears that social evaluation concerns may underly the fears reported by this sample of school-refusers.

School-refusers vs. Non-refusers

As shown in Table 2, school-refusers and non-refusers differed significantly on the school problems (t = 2.2, p .05), depression (t = 2.1, p .01), and locus of control (t = -2.5, p .05) variables. The non-refusers had no more internal locus of control, were less anxious and depressed, and reported fewer problems in school

Non-refusers vs. Normals

As displayed in Table 3, the non-refusers and normals were not

discriminated on the fear, school problems, physical complaints, or locus of control variables. However, the non-refusers had significantly more peer problems (t = -3.5, p .05), family problems (t = -3.5, p .05), depression (t = -4.2, p .05) and reality testing (t = 4.2, p .05) than did the normals.

Comparisons Among Sources.

Ackenbach behavior problem checklists were completed by the parents and teacher for each school-refuser. The number of behavior problems reported by teachers (mean = 49) and parents (mean = 55.5) were much higher than expected for a normal sample (mean = 19).

Table 4 shows the correlations among the parent's, teacher's, and school-refuser's reports of adjustment problems. There is little agreement among the various sources. For example, there is an inverse relationship between parent and teacher ratings of behavior problems (r = -.35, ns). The more externally controlled a school refuser is, the more likely the parent is to indicate behavior problems (r = .75, p .05). This may be an indication of the school-refusers dependancy upon the parents. For teachers, those students with the greatest non-attendance are likely to be rated as having more behavior problems (r = .69, p .05).

It appears that parents, teachers, and school-refusers have different conceptions regarding problem behavior. These low correlations point to the importance in using multiple sources to assess the behavior problems of school-refusers in a variety of settings.

In summary, this sample of school-refusers experienced a variety of significant problems, in addition to high rates of fear and absenteeism. The school-refusers reported experiencing family problems, depression, somatic

complaints, problems with peers, and a belief that they have little control over their academic performance. In comparison to the school-refusers, their non-refuser, special education classmates had a more internal locus of control, were less depressed, and reported fewer problems with school. The normal comparison group was significantly less disturbed than the special education groups on most of the subscales reported.

These results suggest that school-refusal is not a unitary problem, but that it is merely one facet of a general socioemotional problem complex characterized by depression, social isolation, problems in relating to family members, somatic complaints, immature temper tantrums, and feelings of helplessness. These findings point to the importance of individual educational planning for school-refusers to ensure that students are not only returned to school, but that they are achieving some success there, both academically and socially.

Figure 1. Means of Standard Scores on the Adjustment Problem Variables for School Refusers, Non-refusers, and Normal Students.

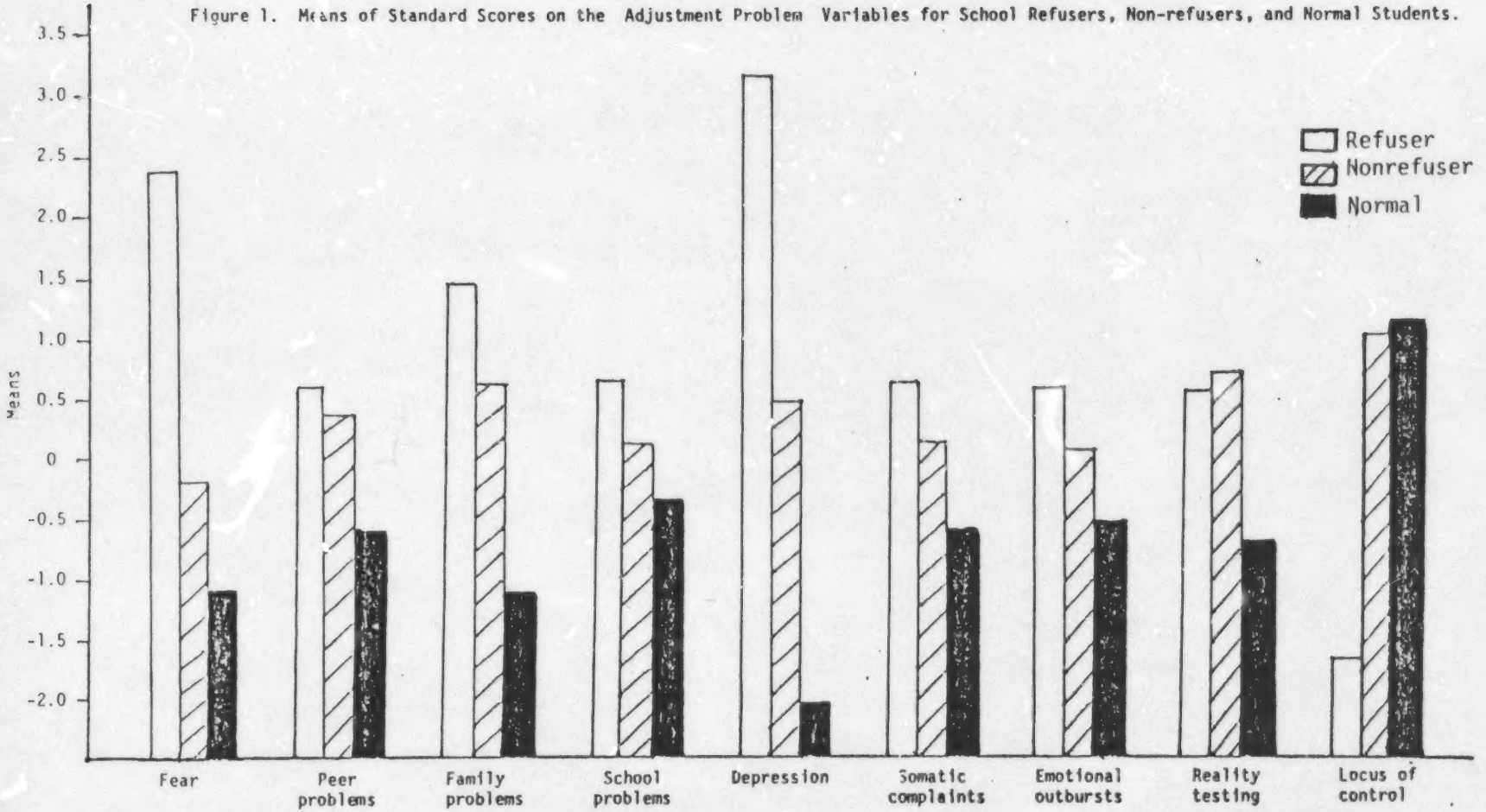

TABLE 1

Comparisons of the Adjustment Problems of School Refusers and Normals

	Refusers		Normals		
Variable	X	σ	X	σ	t
Fear	2.4	3.9	-1.2	2.7	-2.8*
Peer problems	0.6	1.2	-0.6	0.5	-3.2*
Family problems	1.5	1.7	-1.2	0.9	-4.9*
School problems	1.0	1.2	-0.4	0.5	-3.5*
Depression	3.3	4.0	-2.2	2.0	-3.1*
Somatic complaints	0.7	1.1	-0.6	0.6	-3.7*
Acting out	0.7	1.5	-0.5	0.5	-2.5*
Reality testing	0.6	1.0	-0.7	0	4.3*
Locus of control	-1.7	2.0	1.2	2.1	4.3*

* p .05 (two-tailed test)

TABLE 2

Comparisons of the Adjustment Problems of School Refusers and Non-refusers

	Refusers		Normals		
Variable	X	σ	X	σ	t
Fear	2.4	3.9	-0.3	4.2	-1.6
Peer problems	0.6	1.2	0.5	0.9	0.4
Family problems	1.5	1.7	0.7	1.7	1.1
School problems	1.0	1.2	0.1	0.7	2.2*
Depression	3.3	4.0	0.5	2.4	2.1*
Somatic complaints	0.7	1.1	0.2	1.0	1.1
Acting out	0.7	1.5	0.1	0.6	1.2
Reality testing	0.6	1.0	0.7	1.1	0.2
Locus of control	-1.7	2.0	1.1	2.9	-2.5*

* $p < .05$ (two-tailed test)

TABLE 3

Comparisons of the Adjustment Problems of School Non-refusers and Normals

	Refusers		Normals		
Variable	X	$\bar{\sigma}$	X	$\bar{\sigma}$	t
Fear	-0.3	4.2	-1.2	2.7	-1.1
Peer problems	0.5	0.9	-0.6	0.5	-3.5*
Family problems	0.7	1.7	-1.2	0.9	-3.5*
School problems	0.1	0.7	-0.4	0.5	-1.6
Depression	0.5	2.4	-2.2	2.0	-4.2*
Somatic complaints	0.2	1.0	-0.6	0.6	1.2
Acting out	0.1	0.6	-0.5	0.5	-2.4*
Reality testing	0.7	1.1	-0.7	0	4.2*
Locus of control	1.1	2.9	1.2	2.1	0.1

* p .05 (two-tailed test)

TABLE 4

Correlations Among Parents', Teachers', and School-refusers' Reports of Adjustment Problems

	1	2	3	4	5**	6
1 Parent ratings of behavior problems (P-CBCL)	1.0					
2 Teacher ratings of behavior problems (T-CBCL)	-0.35					
3 Students' self-reported fear (FSS-C)	0.12	-0.37	1.0			
4 Students' self-reported adjustment problems (CAS)	-0.20	-0.04	0.55	1.0		
5 Students' self-report of locus of control (IAR**)	-0.75*	-0.21	0.72*	0.62*	1.0	
6 Nonattendance	-0.23	0.69*	-0.45	0.08	-0.18	

* $p < .05$ (two-tailed test)

** inverse scoring

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